



Mid-Ohio Foodbank

Photo/ Video/ Story Release Form

Name: _____

Phone: _____

Email: _____

Address: _____

I authorize Mid-Ohio Foodbank to use photographs/ video/ audio of me, and/or my story, for Foodbank-related publications, including website entries, without payment or any other consideration.

By signing below, I certify that I am at least 18 years of age and am competent to contract in my own name. I fully understand the contents, meaning, and impact of this release.

Signature: _____

Date: _____

Staff Notes: _____